

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 198

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New York Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. Ms. Deborah L. Lewis

Mailing Address 4280 Country Squire Lane

City
FairfaxState
VAZip Code
22032-1610FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : PR211736814

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

Full Name (Last, First, Middle Initial)

B. Mr. Everton M. Lewis

Mailing Address 1751 2nd Avenue Apt. 20F

City
New YorkState
NYZip Code
10128-5379FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : PR211756814

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Mr. John A. Forte

Mailing Address 1 Chandler Drive

City
Ballston LakeState
NYZip Code
12019-1335FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : PR211926814

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

583.34

TOTAL This Period (last page this line number only)..... ►